

Members

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Sen. Vi Simpson
Rep. Cindy Noe
Rep. Charlie Brown
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Donna Lisa Gibson
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Loretta Kroin
Bryan Lett
Valerie N. Markley
Robert N. Postlethwait
David Thomas
Kathleen O'Connell
Kurt Carlson
Chuck Clark
Caroline Doebbling
Christopher Taelman



COMMISSION ON MENTAL HEALTH

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MEETING MINUTES¹

Meeting Date: August 30, 2005
Meeting Time: 10:30 A.M.
Meeting Place: State House, 200 W. Washington St., Room 233
Meeting City: Indianapolis, Indiana
Meeting Number: 2

Members Present: Sen. Connie Lawson, Chairperson; Sen. Vi Simpson; Rep. Cindy Noe; Rep. Charlie Brown; Abigail P. Flynn; Loretta Kroin; Bryan Lett; Valerie N. Markley; Kathleen O'Connell; Kurt Carlson; Chuck Clark; Caroline Doebbling.

Members Absent: Donna Lisa Gibson; Robert N. Postlethwait; David Thomas.

I. Call to Order

Senator Connie Lawson, Chairperson, called the meeting to order at 10:35 A.M. and asked the members to introduce themselves.

¹ Exhibits and other materials referenced in these minutes can be inspected and copied in the Legislative Information Center in Room 230 of the State House in Indianapolis, Indiana. Requests for copies may be mailed to the Legislative Information Center, Legislative Services Agency, 200 West Washington Street, Indianapolis, IN 46204-2789. A fee of \$0.15 per page and mailing costs will be charged for copies. These minutes are also available on the Internet at the General Assembly homepage. The URL address of the General Assembly homepage is <http://www.ai.org/legislative/>. No fee is charged for viewing, downloading, or printing minutes from the Internet.

II. Discussion Concerning Implementation of HEA 1325

Ms. Jeanne Labrecque, Director of the Office of Medicaid Policy and Planning (OMPP), discussed the provisions of HEA 1325 which require the Mental Health Quality Advisory Committee (Committee) to advise OMPP and the Drug Utilization Review Board concerning implementation of IC 12-15-35.5-7 which allows the Drug Utilization Review Board to establish restrictions on certain drugs. Ms. Labrecque informed the Commission that the Committee has been appointed and will begin working in the near future. She provided a list of the members of the Committee and a copy of the Indiana Behavioral Pharmacy Report which lists behavioral and narcotic pharmacy claims. (Exhibits 1 and 2 respectively)

OMPP is working to develop a system of quality triggers which will cause an analysis of new drugs that are prescribed when behavioral drugs are already being used by an individual. The triggers will be designed not to stop the use of drugs a person is already using but to provide for certain reviews before additional drugs are prescribed.

In response to a question from Dr. Caroline Doebbling, Ms. Labrecque stated that it will take time for the group to set criteria that will take into account that some patients receive new drugs when they are going off old drugs. If the triggers automatically stop any new drugs from being prescribed, that could cause a problem in the process of reducing the number of drugs a person uses. Finding a way to allow for changes in an individual's drug regime is the kind of issue for which the Committee is trying to develop plans.

III. Discussion Concerning Medicaid Select

Ms. Jean Labrecque told the Commission that the Medicaid Select Advisory Committee has been reconvened to help develop a program to identify who can best be served by Medicaid Select in a managed care setting. (Exhibit 3) In order to help identify the population of individuals with disabilities in managed care, OMPP is gathering statistical information in Marion County to determine the numbers of individuals with various medical diagnoses. (Exhibit 4)

IV. Discussion of the Medicare Modernization Act (Part D)

(A) Ms. Jean Labrecque reported that OMPP is looking at how the Hoosier RX program will be impacted by the new Medicare drug program. OMPP is now trying to identify where dual eligibles are located so that OMPP can develop plans to communicate with the individuals concerning which drug plans would be most beneficial for them. OMPP needs to determine who is actually writing prescriptions. In nursing homes, often a physician is not the person writing the prescriptions. Beginning January 1, Medicaid will no longer cover drugs which are covered by Part D. Individuals who do not choose a plan will be auto assigned to one of the plans. Dual eligibles will be able to change their pharmacy plan on a monthly basis.

Representative Brown said that determining the appropriate prescription plan will be intimidating for many individuals and indicated that he hoped the information OMPP is preparing will be written so that the average person can understand it. Ms. Labrecque reported that Medicare has already begun sending information to dual eligibles. However, she found some of the information confusing and hopes that individuals will turn to their care givers, physicians, and pharmacists for help.

Senator Lawson asked how individuals will be notified concerning which drugs the state will still pay for. Ms. Labrecque said that mental health drugs will all be covered by Part D.

She did caution that the different plans could have different copays for the different drugs. Ms. Labrecque indicated that there are a number of groups providing information to persons who will need to decide on a pharmacy plan, including the Purdue Homemakers and area agencies on aging.

(B) Ms. Katherine Lester, Eli Lilly and Company, provided the Commission with information on Part D. (Exhibit 5) The members raised a number of concerns about implementation of Part D including:

- Will the different plans all use any pharmacy, or when consumers have to make their decision on which plan to opt into will they have to find out which pharmacies they can use?
- For individuals who are auto assigned to a plan, will the distance to pharmacies be considered?
- How will individuals in nursing homes be assisted in choosing or being assigned to a plan?
- Because of deductibles, a consumer's payout will be unevenly divided over the year. Who will help consumers understand and plan for that?
- Who is going to design the information for consumers so they can actually understand the choices they will be making among the ten available plans likely to be available in Indiana?
- For Medicaid spend down, how will the payment for drugs be figured - monthly or otherwise?
- Will drugstores have the technology to track drug costs and assist consumers?
- How will the 90 day mail order plans work with consumers?

Ms. Lester and Ms. Julie Newland both emphasized that Lilly has individuals who will work with groups throughout the state to make the choices as clear as possible. Making decisions has been made more difficult since the plans that will be available in Indiana have not yet been identified.

(C) Ms. Harriet Rose, NAMI, expressed the concerns NAMI has for individuals who are dual eligibles. (Exhibit 6)

IV. Other Business

The next meeting, which will be held September 13, at 10:30 in Room 233 of the State House, will include an update on plans for the three mental hospitals and updates on forensic issues.

The meeting was adjourned at 12:20 P.M.